

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-676)							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	NO.	DEF.	NO.	DEF.	NO.	DEF.		NO.	DEF.	NO.	DEF.	NO.	DEF.
1	/						61						
2		/					62						
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50													
TOTAL NO.	1						TOTAL NO.						
TOTAL DEF.	5						TOTAL DEF.						
TOTAL	6						TOTAL						